PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective OCHObor1, 2003

10/003847

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN.
			(Column 1)		(Column 2)		1	TYPE		OR	SMALL	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	*385	OR	BASIC FEE	STYO
TOTAL CHARGEABLE CLAIMS			minus 20= 1		*			X\$G =		OR	X\$ 8 =	·
INDEPENDENT CLAIMS			minus 3 =		*		ĺ	X43=		OR	×86=	
MULTIPLE DEPENDENT CLAIM PRESENT							•	+145=		OR	+∂90=	
* If the difference in column 1 is less than zero, enter "0" in column 2							ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										•	OTHER THAN	
	\mathcal{L}	(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 8	Minus	** 2		= —		X\$Q=		OR	X\$(8=	÷
	Independent	* J	Minus	IS 1. *** 3 LE DEPENDENT CLA		-		XK3=		OR	×26=	
			JETH DE JEH	ENOLIT				+ 15:=		OR	-M0	
-							<u>-</u>	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	·	(Column 1)		•				- 1				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		x19=		OR	x\$/8=	
	Independent	*	Minus	***	·			X43=		OR	×86=	•
	TINOT FRESE	NTATION OF MU	DETIPLE DEF	ENDENT	CLAIM		' [+145=		OR	tJ90=	
			· · .			· · · · · · · · · · · · · · · · · · ·	. L	TOTAL DDIT. FEE		OR	TOTAL, ADDIT. FEE	
. •	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	** .		=		x\$9=		OR	X\$[8=	
AME	Independent	*	Minus	***	CLAIM	=		X13=		OR	X86	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+ 146=		OR	t}90 -	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										I ∩□	TOTAL ADDIT. FEE	
***	If the "Highest Nur The "Highest Num	mber Previously Pa ber Previously Paid	aid For" IN THI d For" (Total or	S SPACE is Independe	s less tha ent) is the	n 3, enter "3." highest numbe			propriate box			